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Message Text

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ORIGIN INT-05

INFO OCT-01 EA-10 IO-10 L-03 ISO-00 /029 R

DRAFTED BY ADEGRAFFENRIED:OMSN:CG
APPROVED BY OMSN:MVTRENT
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P 051547Z JUN 75
FM SECSTATE WASHDC
TO HICOMTERPACIS

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E.O.11652: N/A
TAGS: PFOR,TQ
SUBJ: HEALTH BENEFITS INFORMATION
PASS TO STATUS LNO BERGESEN

IN ADDITION OTHER HEALTH BENEFITS LISTED MEMORANDUM GIVEN SENATOR BORJA, FOLLOWING FEDERAL PROGRAMS WILL APPLY TO NMI UNDER COMMONWEALTH STATUS. THIS INFO SHOULD BE PASSED EDWARD PANGELINAN FOR SUCH USE AS HE MAY WISH TO COUNTER MISREPRESENTATIONS AND ALLEGATIONS REGARDING FEDERAL HEALTH BENEFITS AVAILABLE UNDER COMMONWEALTH.

1. MEDICAL ASSISTANCE PROGRAM (MEDICAID-TITLE IX U.S. SOCIAL SECURITY ACT)

NATURE OF PROGRAM ACTIVITY:
- MEDICAL ASSISTANCE IS A GRANT-IN-AID PROGRAM TO ASSIST STATES IN PAYING FOR MEDICAL CARE AND HEALTH-RELATED SERVICES FOR CERTAIN GROUPS OF NEEDY PEOPLE, AND TO PROVIDE REHABILITATION AND OTHER SERVICES TO HELP SUCH PERSONS ATTAIN OR RETAIN CAPABILITY FOR INDEPENDENCE OR SELF-CARE. THE PROGRAM IS POPULARLY KNOWN AS "MEDICAID".

ELIGIBILITY:
- PERSONS ELIGIBLE FOR MEDICAL ASSISTANCE INCLUDE NEEDY FAMILIES WITH DEPENDENT CHILDREN, AND AGED, BLIND, OR PERMANENTLY AND TOTALLY DISABLED INDIVIDUALS WHO ARE CURRENT-
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LY RECEIVING FEDERALLY-AIDED CATEGORICAL PUBLIC ASSIS-

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TANCE, OR WHO WOULD BE ELIGIBLE TO RECEIVE SUCH ASSIS-
TANCE EXCEPT THAT THEY ARE ABLE TO MEET THEIR OWN MAINTE-
NANCE NEEDS. A STATE MUST INCLUDE ALL PERSONS RECEIVING
OR ELIGIBLE TO RECEIVE MONEY PAYMENTS UNDER THE PUBLIC
ASSISTANCE TITLES OF THE SOCIAL SECURITY ACT (THE INDIGENT).
IT MAY INCLUDE THOSE WHO WOULD BE ELIGIBLE TO RECEIVE SUCH
ASSISTANCE EXCEPT THAT THEY ARE ABLE TO MEET THEIR OWN
MAINTENANCE NEEDS (THE MEDICALLY INDIGENT), AND ALL
CHILDREN UNDER 21 WHO NEED MEDICAL CARE AND CANNOT AFFORD
IT. ALL 54 JURISDICTIONS IN THE UNITED STATES CAN PARTI-
CIPATE IN THE MEDICAL ASSISTANCE PROGRAM.

AVAILABLE ASSISTANCE:
- FEDERAL FINANCIAL PARTICIPATION IN A STATE'S EXPEN-
DITURES FOR PAYMENTS TO MEDICAL VENDORS VARIES FROM 50
TO 83 PERCENT ACCORDING TO THE PER CAPITA INCOME OF THE
STATE. STAFF COSTS (SKILLED PROFESSIONAL MEDICAL
PERSONNEL AND SUPPORTING STAFF) AND COSTS OF TRAINING ARE
SUBJECT TO THE 75 PERCENT RATE OF FEDERAL FINANCIAL
PARTICIPATION; OTHER ADMINISTRATIVE COSTS, 50 PERCENT.
THE STATE MEDICAL ASSISTANCE AGENCY MAKES DIRECT PAYMENTS
TO PROVIDERS OF MEDICAL CARE FOR PART OR ALL THE COST OF
SUCH CARE MADE AVAILABLE TO ELIGIBLE INDIVIDUALS.

USE RESTRICTIONS:
- MEDICAL ASSISTANCE FUNDS CAN BE USED ONLY TO PAY FOR
MEDICAL AND HEALTH-RELATED SERVICES INCLUDED WITHIN A
STATE'S PLAN. STATES MUST PROVIDE IN- AND OUT-PATIENT
HOSPITAL SERVICES; OTHER TYPES OF LABORATORY AND X-RAY
SERVICES; SKILLED NURSING HOME SERVICES FOR INDIVIDUALS
21 YEARS OF AGE OR OLDER; PHYSICIANS' SERVICES; OTHER
AND EARLY AND PERIODIC SCREENING DIAGNOSIS AND
TREATMENT. HOME CARE SERVICES MUST ALSO BE PROVIDED TO
THOSE WHO MEET ELIGIBILITY REQUIREMENTS.

AVERAGE ASSISTANCE:
AVERAGE MEDICAL CARE PAYMENTS FOR THE MONTH OF
SEPTEMBER L968 WERE $76 FOR ALL RECIPIENTS; FOR PERSONS
OVER 65, $99; FOR THE BLIND, $72; FOR THE PERMANENTLY AND
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TOTALLY DISABLED, $124; AND FOR PERSONS IN FAMILIES WITH
DEPENDENT CHILDREN, $45.

2. AID TO AGED, BLIND, AND DISABLED (SUPPLEMENTAL SECUR-
ITY INCOME-TITLE XVI U.S. SOCIAL SECURITY ACT)

NATURE OF PROGRAM ACTIVITY:
- THE SUPPLEMENTAL INCOME PROGRAM (SSI) IS PART OF A
COMPREHENSIVE STRATEGY TO HELP THE AGED, BLIND, AND

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DISABLED THROUGH A FEDERAL-STATE PARTNERSHIP. THE INTENT IS TO ALLOCATE TO EACH LEVEL OF GOVERNMENT, FEDERAL AND STATE, THOSE FUNCTIONS IT IS BEST ABLE TO PERFORM. AN IMPORTANT OBJECTIVE OF THIS PARTNERSHIP IS AN IMPROVED SYSTEM OF INFORMATION, REFERRAL, AND FOLLOW-UP. STATES ARE ABLE TO CONCENTRATE ON SOCIAL AND REHABILITATIVE SERVICES RATHER THAN CASH ASSISTANCE.

ELIGIBILITY:
- THE ELIGIBILITY OF AN INDIVIDUAL WHO HAS ATTAINED AGE 65 OR WHO IS BLIND OR DISABLED IS DETERMINED ON THE BASIS OF HIS MONTHLY INCOME, THE FIRST $20 OF SOCIAL SECURITY OR OTHER INCOME WOULD NOT BE COUNTED. AN ADDITIONAL $65 OF EARNED INCOME, PLUS ONE-HALD OF ANY MONTHLY EARNINGS ABOVE $65, WOULD ALSO NOT BE COUNTED. IF, AFTER THESE EXCLUSIONS, AN INDIVIDUAL'S COUNTABLE INCOME IS LESS THAN $146 A MONTH ($219 FOR A COUPLE BOTH OF WHOM ARE CATEGORIZED AS ABOVE) AND RESOURCES ARE LESS THAN $1,500 ($2,250 FOR A COUPLE), HE IS ELIGIBLE FOR PAYMENTS. THE VALUE OF THE HOME, HOUSEHOLD GOODS, PERSONAL EFFECTS AUTOMOBILE, AND PROPERTY NEEDED FOR SELF-SUPPORT ARE, IF FOUND REASONABLE, EXCLUDED IN DETERMINING VALUE OF RESOURCES. LIFE INSURANCE POLICIES WITH FACE VALUE UNDER $1,500 ARE EXCLUDED IN RESOURCE EVALUATION.

USE RESTRICTIONS:
- SUPPLEMENTAL SECURITY INCOME PAYMENTS ARE MADE TO PERSONS WHO HAVE ATTAINED AGE 65 OR WHO ARE BLIND OR DISABLED.

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- MONTHLY FEDERAL CASH PAYMENTS RANGE FROM $1 TO $146 FOR A SINGLE PERSON AND $1 TO $219 FOR AN INDIVIDUAL AND ELIGIBLE SPOUSE. BY JUNE, 1975, SSI WILL RAISE THE PAYMENTS TO $157 PER PERSON AND $236 PER COUPLE.

3. HEALTH INSURANCE FOR THE AGED - HOSPITAL INSURANCE (MEDICARE U.S. SOCIAL SECURITY ACT)

NATURE OF PROGRAM ACTIVITY:
- MEDICARE PROVIDES HOSPITAL INSURANCE PROTECTION FOR COVERED SERVICES TO ANY PERSON 65 OR OVER WHO IS ENTITLED TO SOCIAL SECURITY BENEFITS. A DEPENDENT SPOUSE 65 OR OVER IS ENTITLED TO MEDICARE BASED ON THE WORKER'S RECORD. THE COVERED PROTECTION IN EACH BENEFIT PERIOD INCLUDES HOSPITAL IN-PATIENT CARE; POST-HOSPITAL EXTENDED CARE; AND HOME HEALTH VISITS BY NURSES OR OTHER HEALTH WORKERS FROM A PARTICIPATING HOME HEALTH AGENCY. IT DOES NOT INCLUDE DOCTORS' SERVICES. UNDER SOCIAL SECURITY,

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WORKERS, THEIR EMPLOYERS, AND SELF-EMPLOYED PEOPLE PAY A CONTRIBUTION BASED ON EARNINGS DURING THEIR WORKING YEARS. AT 65, THE PORTION OF THEIR CONTRIBUTION THAT HAS GONE INTO A SPECIAL HOSPITAL INSURANCE TRUST FUND GUARANTEES THAT WORKERS WILL HAVE HELP IN PAYING HOSPITAL BILLS.

ELIGIBILITY:
- ALL PEOPLE 65 OR OVER ARE ELIGIBLE FOR HOSPITAL INSURANCE PROTECTION IF THEY ARE ENTITLED TO SOCIAL SECURITY. NEARLY EVERYONE WHO REACHES 65 BEFORE 1968 IS ELIGIBLE FOR HOSPITAL INSURANCE, INCLUDING PEOPLE NOT ELIGIBLE FOR CASH SOCIAL SECURITY BENEFITS. A PERSON REACHING 65 IN 1968 OR LATER WHO IS NOT ELIGIBLE FOR CASH BENEFITS NEEDS SOME WORK CREDIT TO QUALIFY FOR HOSPITAL INSURANCE BENEFITS. THE AMOUNT OF CREDIT REQUIRED FOR HOSPITAL INSURANCE WILL BE THE SAME AS FOR SOCIAL SECURITY CASH BENEFITS.

USE RESTRICTIONS:
- HOSPITAL INSURANCE BENEFITS ARE PAID TO PARTICIPATING HOSPITALS, EXTENDED CARE FACILITIES (SKILLED NURSING HOMES), AND RELATED PROVIDERS OF HEALTH CARE TO COVER THE REASONABLE COST OF MEDICALLY NECESSARY SERVICES FURNISHED

TO INDIVIDUALS ENTITLED UNDER THIS PROGRAM.

AVERAGE ASSISTANCE:
- BENEFITS MAY BE PAID FOR MOST OF THE REASONABLE COSTS OF IN-PATIENT HOSPITAL SERVICES AND POST-HOSPITAL EXTENDED CARE SERVICES INCURRED IN A BENEFIT PERIOD. THE BENEFICIARY IS RESPONSIBLE FOR A $68 IN-PATIENT HOSPITAL DEDUCTIBLE, A $17 PER DAY CO-INSURANCE AMOUNT FOR THE 61ST THROUGH 90TH DAY OF IN-PATIENT HOSPITAL CARE, AND A $8.50 PER DAY CO-INSURANCE AMOUNT AFTER 20 DAYS OF EXTENDED CARE SERVICES.

- LISTED BELOW BY TYPE OF BILL ARE THE AVERAGE REIMBURSEMENT AMOUNTS PER CLAIM FOR FY 1972 AND FY 1973:

- TYPE OF BILL	FY72	FY73
1.IN-PATIENT HOSPITAL	$826	$877
2. EXTENDED CARE FACILITY	393	402
3. HOME HEALTH	89	92

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Message Attributes

Automatic Decaptioning: X
Capture Date: 01 JAN 1994
Channel Indicators: n/a
Current Classification: UNCLASSIFIED
Concepts: MEDICAL CARE, HEALTH, COMMONWELTH, NEGOTIATIONS
Control Number: n/a
Copy: SINGLE
Draft Date: 05 JUN 1975
Decaption Date: 01 JAN 1960
Decaption Note:
Disposition Action: n/a
Disposition Approved on Date:
Disposition Authority: n/a
Disposition Case Number: n/a
Disposition Comment:
Disposition Date: 01 JAN 1960
Disposition Event:
Disposition History: n/a
Disposition Reason:
Disposition Remarks:
Document Number: 1975STATE131097
Document Source: CORE
Document Unique ID: 00
Drafter: OMSN:CG
Enclosure: n/a
Executive Order: N/A
Errors: N/A
Film Number: D750196-1166
From: STATE
Handling Restrictions: n/a
Image Path:
ISecure: 1
Legacy Key: link1975/newtext/t19750677/aaaacsgk.tel
Line Count: 219
Locator: TEXT ON-LINE, ON MICROFILM
Office: ORIGIN INT
Original Classification: UNCLASSIFIED
Original Handling Restrictions: n/a
Original Previous Classification: n/a
Original Previous Handling Restrictions: n/a
Page Count: 4
Previous Channel Indicators: n/a
Previous Classification: n/a
Previous Handling Restrictions: n/a
Reference: n/a
Review Action: RELEASED, APPROVED
Review Authority: greeneet
Review Comment: n/a
Review Content Flags:
Review Date: 13 MAR 2003
Review Event:
Review Exemptions: n/a
Review History: RELEASED <13 MAR 2003 by PhilliR0>; APPROVED <30 JAN 2004 by greeneet>
Review Markings:

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EO Systematic Review
06 JUL 2006

Review Media Identifier:
Review Referrals: n/a
Review Release Date: n/a
Review Release Event: n/a
Review Transfer Date:
Review Withdrawn Fields: n/a
Secure: OPEN
Status: NATIVE
Subject: HEALTH BENEFITS INFORMATION PASS TO STATUS LNO BERGESEN
TAGS: PFOR, CFED, TQ, US
To: HICOMTERPACIS
Type: TE
Markings: Margaret P. Grafeld Declassified/Released US Department of State EO Systematic Review 06 JUL 2006